## This portion MUST be returned with your payment to ensure proper credit. THANK YOU

| ACCOUNT BILLED   | PROJECT NAME                            |                            | PROJECT ID |
|--|---|----------------------------|------------|
| UINTAH COUNTY ROAD DEPT  | UINTAH COUNTY ASPH                      | UINTAH COUNTY ASPHALT MINE |            |
| DUE DATE ANNUAL FEE AMOUNT DU  | FEE NOT ENCLOSED                        | Change of Address          |            |
| 07/26/2002 \$1,000 \$1,000   | Permittee requests                      | Contact                    |            |
| TAX ID OR SOCIAL SECURITY #  | an inspection to close out this permit. | Address RECEIV             | /ED        |
| DIVISION OF OIL GAS AND MINING<br>1594 WEST NORTH TEMPLE SUITE 1210<br>PO BOX 145801<br>SALT LAKE CITY UT 84114-5801 |   | JUL 17 20                  | 02         |
|  |   | State OIL, GA2ipAND MINING |            |
|  |   | Phone                      |            |

Please make check payable to:
Division of Oil, Gas and Mining